



Complete (if applicable)

Telephone

Date

(303) 740-1980

01/19/07

EEE KOOA	NICHARTAI	Complete if Known	
FEE TRANSMITTAL		Application Number	10/697,540
tor kyezou6		Filing Date	October 29, 2003
Patent fees are subject to annual revision.		First Named Inventor	Chet R. Douglas
Applicant claims small er	ntity status. See 37 CFR 1.27.	Examiner Name	Hassan, Aurangzeb
		Art Unit	2182
TOTAL AMOUNT OF PAY	YMENT (\$) 400.00	Attorney Docket No.	42P17156
METHOD OF PAYMENT (check all that apply)			
□ Credit card □ Money Order □ None □ Other (please identify):			
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.			
FEE CALCULATION			
1. EXTRA CLAIM FEES Claims Total Ctaims Independent Claims At = 0			
F00 F00 F00 F00			
Code (5) Code (5)	Fee Description		Fee Paid
1051 130 2051 65 1052 50 2052 25			
2053 130 2053 130			
1251 120 2251 60			
1252 450 2252 225 1253 1,020 2253 510			
1254 1,590 2254 795			
1255 2,160 2255 1,080			
1401 500 2401 250 1402 500 2402 250	• •		
1403 1,000 2403 500	• • • • • • • • • • • • • • • • • • • •		
1451 1,510 2451 1,510	· · · · · · · · · · · · · · · · · · ·		
1460 130 2460 130 1807 50 1807 50			· · ·
1806 180 1806 180			
1809 790 1809 395		129(a))	
	For each additional invention to be examined (37 CF	R § 1.129(b))	
Other fee (specify)			
	SUBTOTAL (2)		(5)

Registration No. (Attorney/Agent)

46,322

Mark L. Wats

SUBMITTED BY

Name (Print/Type)

Signature